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## Branch Health Clinic Everett remembers with “Inaugural HM2 David R. Ray Top Doc Competition”

BY VJOHNSON – FEBRUARY 14, 2014

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By Douglas H. Stutz, Naval Hospital Bremerton Public Affairs



Hospital Corpsman 2nd Class Joshua Thornbloom and HM2 Michael Pulkrabek, ‘Team Mighty Chux,’ conduct a rapid trauma assessment of a wounded casualty on the simulated battlefield in the “1st Annual HM2 David R. Ray Top Doc Competition” held Feb 13, 2014, at Branch Health Clinic Everett (Wash.) as part of the command’s remembrance ceremony to honor the legacy of their clinic namesake; Medal of Honor recipient Hospital Corpsman 2nd Class David R. Ray, who would have turned 69 on Feb 14. The event gave corpsmen the opportunity to hone their skills just as Ray did 45 years ago and was called upon to use on the field of battle. (Photo by Douglas H. Stutz)

Hospital corpsmen and other staff members of Branch Health Clinic (BHC) Everett kept the memory alive of their clinic namesake by holding the “1st Annual HM2 David R. Ray Top Doc Competition” on Feb. 13, 2014.

The legacy of Medal of Honor recipient Hospital Corpsman 2<sup>nd</sup> Class David R. Ray, who would have turned 69 on Feb 14, was remembered by what he accomplished as a corpsman and by his sacrifice on the field of battle.

“It is important to the command that the corpsmen understand where they come from and have an appreciation for what it takes to do the things a Sailor like HM2 Ray did, and to celebrate the accomplishments and sacrifices of Sailors like him,” said Hospital Corpsman 1<sup>st</sup> Class Michael A Arroyo, BHC Everett Medical Services Leading Petty Officer.

Ray was awarded the Congressional Medal of Honor (posthumously) for his actions during the Vietnam War at Phu Loc 6 near An Hoa in Quang Nam Province, Republic of Vietnam, on March 19, 1969. BHC Everett, commissioned in 2002, is located within the David R. Ray Health Center.

“His legacy is extremely important to me as a person, as a corpsman and a leader of corpsmen. He is the epitome of what we all strive to be as corpsmen and human beings,” stated Arroyo, an Independent Duty Corpsman from Pomona, Calif. assigned to

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the clinic since Dec 23, 2013, with over 15 years of Navy experience.

The top doc competition involved professional and practical testing such as what Ray learned in honing his corpsman skills over 40 years ago. The goal of the competition wasn't to replicate that fateful day on a blood-soaked patch of ground in Vietnam, but to bring a hands-on sense of urgency and realism in a training environment.

“This is training that we all need to know because it is the type of scenario that we could find ourselves in, just as HM2 Ray did. In a way, it does remind us of his heroism. We had a lot of interest but due to patient and clinic duties we just couldn't get everyone out and involved,” said Hospital Corpsman 3<sup>rd</sup> Class Steven Foley, a Federal Way, Wash. native.

There were six two-member teams pitted against the stress of the situation, evaluated by the course instructors, and scrutinized by their peers. They were graded on every detail to render emergency trauma treatment to a wounded casualty.

And the clock was ticking.



From ‘run to prone’ to ‘high crawl’ to ‘low crawl,’ Hospitalman Steven Taylor (L) and Hospital Corpsman 3<sup>rd</sup> Class Cody Carter take part in the two-member team “1<sup>st</sup> Annual HM2 David R. Ray Top Doc Competition” held at Branch Health Clinic Everett (Wash.) on Feb. 13, 2014, as part of the command’s remembrance ceremony to honor the legacy of their clinic namesake; Medal of Honor recipient Hospital Corpsman 2<sup>nd</sup> Class David R. Ray, who would have turned 69 on Feb 14. The event gave corpsmen the opportunity to hone their skills just as Ray did 45 years ago and was called upon to use on the field of battle. (Photo by Douglas H. Stutz)

The teams initially completed a warm-up 25 question knowledge test that consisted of five specific topics based on Physical Exam; Pharmacology; Medical Procedures; Documentation/record keeping; and Fleet/Fleet Marine Force Military Knowledge.

The practical application commenced with the teams having to move to a downed casualty 100 yards away in 10 minutes or less by doing the following: a five yard ‘run to prone’ a total of six times for 30 yards; followed by a 15 yard ‘high crawl’; then a five yard ‘low-crawl’; then the contestants had to gather up all of their gear before covering the final 50 yards to the casualty.

“The ‘run to prone’ is basically a rapid way to move and avoid being shot. ‘High crawl’ is elbow and knees, slower but faster than the ‘low crawl,’ but less of a target then standing straight up. The ‘low crawl’ is on your belly moving,” explained Arroyo.

Upon arriving at the wounded casualty, the corpsman had to conduct a rapid trauma assessment in five minutes or less by concentrating on lifesaving steps, controlling major hemorrhage, establishing an airway and breathing, and noting from head to toe for any life threatening injuries. They then had to relocate the casualty and follow up by conducting a focused Medical Assessment and additional treatment in 10 minutes or less.

“The focused assessment is just that; a corpsman is in a safer environment where they can take more time with their patient and get more detailed history and examination, including definitive treatments and how to transport. The transport decision is determined by ‘can I keep this guy here a bit or does he need to go right now?’” Arroyo said.

Additionally, the actual casualty type remained unknown until the corpsmen arrived on the scene. One downed casualty had ‘stepped’ on a improvised explosive device. Another patient was suffering from gunshot wounds. There were lacerations, breaks, fractures, as well as internal and external bleeding. Through the entire scenario, there was a grading criteria at each ‘station’ based on the importance. If a corpsman failed to complete a section in the allotted time they were eliminated. If they missed a critical element in their battle field treatment such as controlling hemorrhage or establishing an airway that results in the death of their patient, they were eliminated.

“This type of training was very beneficial. It’s a great refresher for us who have been with the Marines. It’s also applicable on board ship,” said Hospital Corpsman 2<sup>nd</sup> Class Joshua Thornbloom, a Portland, Ore. native who teamed with HM2 Michael Pulkrabek as ‘Team Mighty Chux’ for the competition.

“I think we all take a lot of pride on who HM2 David R. Ray was, what he did for the Navy and what he did for his Marines in battle. There is just so much respect for him and this competition is a great way to remember him as a man and honor him as a

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corpsman,” added Pulkrabek, from Port Orchard, Wash.

‘Team Mighty Chux’ of Thornbloom and Pulkrabek claimed honors as the initial recipients of the Top Doc Competition.

The BHC Everett Chief Petty Officer Mess conceived the idea to continually increase the command’s esprit d ‘corps, team work, and morale. A cadre of junior corpsmen embraced the concept and undertook coordinating the actual events.

“It is a reflection of the pride corpsmen have in what they do and the enormous respect they have for those who have come before them. HM3 Sean C. McClain, HM3 Isaac Jernigan, Hospitalman Bouara Mongkhonvilay and HN Kayla Pesek were the masterminds and driving force,” explained Arroyo, who along with physician assistant Lt. j.g. Jeffrey Osborn, helped facilitate and provide guidance for this event.

Arroyo attests that the top doc competition was a microcosm of what any corpsman can expect to experience when forward deployed and suddenly thrust into battle, which was exactly what HM2 David R. Ray was called upon to do 45 years ago.

“Not a bad start for the first time. Our enlisted staff did a very good job and overall we got some great training done. I think HM2 Ray would have been pleased,” Hospital Corpsman Master Chief Michael Garritson, BHC Everett Senior Enlisted Leader said, noting that with the initial success of the inaugural top doc event, they will open it up to additional participation beyond just clinic staff and extend offers to more commands.

*“For conspicuous gallantry and intrepidity at the risk of his life above and beyond the call of duty while serving as a HM2 with Battery D, 2d Battalion, at Phu Loc 6, near An Hoa. During the early morning hours, an estimated battalion-sized enemy force launched a determined assault against the battery’s position, and succeeded in effecting a penetration of the barbed-wire perimeter. The initial burst of enemy fire caused numerous casualties among the Marines who had immediately manned their howitzers during the rocket and mortar attack. Undaunted by the intense hostile fire, HM2 Ray moved from parapet to parapet, rendering emergency medical treatment to the wounded. Although seriously wounded himself while administering first aid to a marine casualty, he refused medical aid and continued his lifesaving efforts. While he was bandaging and attempting to comfort another wounded marine, HM2 Ray was forced to battle two enemy soldiers who attacked his position, personally killing one and wounding the other. Rapidly losing his strength as a result of his severe wounds, he nonetheless managed to move through the hail of enemy fire to other casualties. Once again, he was faced with the intense fire of oncoming enemy troops and, despite the grave personal danger and insurmountable odds, succeeded in treating the wounded and holding off the enemy until he ran out of ammunition, at which time he sustained fatal wounds. HM2 Ray’s final act of heroism was to protect the patient he was treating. He threw himself upon the wounded Marine, thus saving the man’s life when an enemy grenade exploded nearby. By his determined and persevering actions, courageous spirit, and selfless devotion to the welfare of his marine comrades, HM2 Ray served to inspire the men of Battery D to heroic efforts in defeating the enemy. His conduct throughout was in keeping with the finest traditions of the U.S. Naval Service.”*



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